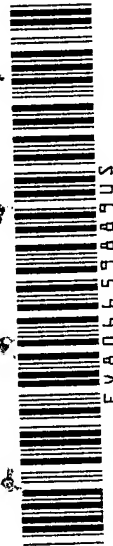


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Addresssee Copy  
Label 11-F, April 2004



UNITED STATES POSTAL SERVICE  
MAIL  
Postmaster: Addressee

<b>ORIGIN (POSTAL SERVICE USE ONLY)</b>		<b>DELIVERY (POSTAL SERVICE USE ONLY)</b>	
PO ZIP Code	Day of Delivery <input type="checkbox"/> Next <input type="checkbox"/> 2nd <input type="checkbox"/> 2nd Del Day	Delivery Attempt	Time
Date Accepted	Scheduled Date of Delivery	Mo. Day	Mo. Day
Mo. Day Year	Month Day	Delivery Attempt	Time
Time Accepted <input type="checkbox"/> AM <input type="checkbox"/> PM	Scheduled Time of Delivery	Mo. Day	Mo. Day
Flat Rate <input type="checkbox"/> or Weight	Mo. Day Year	Delivery Date	Time
lbs. ozs.	Int'l Alpha Country Code	Mo. Day	Mo. Day
CUSTOMER USE ONLY		Employee Signature	
Postage		Employee Signature	
Return Receipt Fee		Employee Signature	
COD Fee		Employee Signature	
Insurance Fee		Employee Signature	
Total Postage & Fees		Employee Signature	
Acceptance Emp. Initials		Employee Signature	

<b>TO: (PLEASE PRINT)</b>	
NAME	
ADDRESS	
CITY	
STATE	
ZIP	
PHONE	
TO: (PLEASE PRINT)	
NAME	
ADDRESS	
CITY	
STATE	
ZIP	
PHONE	

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